Michigan Department of Health and Human Services

MI Choice Section 1915(b) Amendment

Reponses to Comments Received During Public Comment May 31, 2016 – June 30, 2016

Please note that the MI Choice Section 1915(b) amendment included only the changes highlighted in the application. Comments addressing other areas of the application not pertaining to the highlighted changes will not be addressed in this Consultation Summary.

Comment: One major concern is the availability of accessible transportation for people with varying mobility needs and devices. Under current Non-Emergency Medical Transportation (NEMT) arrangements, people with special mobility needs have a difficult time arranging for transportation. We suggest that a provision in the contractual agreements between providers and Prepaid Ambulatory Health Plans (PAHPs) ensure adequate resources are in place to guarantee these needs are met.

Response: Provisions are currently in place in the waiver application and in the contracts between PAHPs and the Michigan Department of Health and Human Services (MDHHS) to ensure adequate provider network capacity for all waiver services. MDHHS provides oversight of PAHPs through Clinical Quality Assurance Reviews and Administrative Quality Assurance Reviews to ensure these provisions are being followed.

Comment: One concern rests with existing relationships between current providers and beneficiaries. Many people with disabilities rely heavily on relationships that are built over time. These relationships have an element of trust and understanding that is not constructed overnight. We want to ensure that the beneficiary has the choice to maintain these relationships and are not forced to change providers through the mandatory enrollment as proposed.

Response: MDHHS agrees that in order to make this transition as smooth as possible, participants who would like to keep their current NEMT providers should be able to do so. It is advantageous for all parties involved to request that PAHPs contract with the participant's current NEMT provider, if the participant desires, instead of "reinventing the wheel" and seeking new providers.

Comment: Will NEMT be implemented statewide all at once, or in two phases by county?

Response: NEMT will be implemented in two phases, by county. Phase I will begin October 1, 2016 and Phase II will begin April 1, 2017.

Comment: We support efforts in increasing access to healthcare services for people with developmental disabilities. NEMT is an important component of this position. With the transition of NEMT from Fee-for-Service to a PAHP, it is imperative that services are not jeopardized, but rather expanded to meet the needs of people with disabilities. The services provided, such as accessibility, coverage area, and hours of service, must meet the needs of the individual.

Response: MDHHS agrees and maintains that the goal of adding NEMT as a service in MI Choice is to allow greater access to NEMT for MI Choice participants.

Comment: This is very exciting for those of us who work in our region. We know this will be a great help to waiver participants.

Response: MDHHS is also excited to help MI Choice participants gain further access to NEMT.

Comment: We support the proposed waiver amendment because the current process of obtaining NEMT is less efficient than the process outlined in the amendment. Moving the service for persons in the MI Choice Waiver to their waiver agency has the potential to improve the delivery of this service. The MI Choice Waiver Agencies have systems in place to monitor their vendor contracts and reward quality, consistent service. They also can respond more quickly to contract failures. The supports coordinators at waiver agencies have more manageable caseloads and routine contact with their participants which should make it easier to have NEMT as part of a plan of supports and services as well as to ensure the type of transportation meets the person's physical needs. In short, we are in favor of this amendment with its phased-in approach to implementation.

Response: MDHHS appreciates this support.